UPDATE SCHOOL INFORMATION

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In an effort to maintain the Board of Barbering and Cosmetology's (Board) records, please provide us the following information:

Name of	dress: ntact* Person(s): Number: er:) act person should be the person we contact whenever we have in to share with schools and their students. You may list more than if necessary.
Address	of School:
E-mail A	Address:
School (Contact* Person(s):
Telepho	ne Number: ()
Fax Nur	dress of School: dress of Sch
informa	tion to share with schools and their students. You may list more tha
Please p	rovide the above information in one of the following manners:
1. E-ma	nil to: Janene_Mayberry@dca.ca.gov
2. Fax t	o: (916) 575-7281
	to: Board of Barbering and Cosmetology PO Box 944226 Sacramento, CA 94244-2260

Attn: Janene Mayberry